

## अखिल भारतीय आयुर्विज्ञान संस्थान, नागपुर ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NAGPUR



Address: Plot no.2, Sector-20, MIHAN, Nagpur-441108

Website: www.aiimsnagpur@edu.in

#### **Application form for the post of Senior Resident**

Application f	form No				
(for Office u	use only)				Affix recent passport size
Details of Application Fee: Transaction ID:- Transaction Date:-		Amount :-		photograph duly Self-attested	
Note: Incom	plete application i	s liable to be r	ejected.		
	blication for the poblect/Specialty)	est of SENIOR	RESIDENT in	<del></del>	
2. A	pplicant's Name	(IN BLOCK <b>Le</b>	ETTER)	Gender:	
3. F	ather's/Husband'	s Name (IN Bl	LOCK LETTERS	S)	
4.	i) Date of Birth o	f Applicant			
	(Attach Proof)		DAY	MONTH	YEAR
	ii) Age: (as on the of receipt of app		YEARS	MONTHS	DAYS
	Vrite in the box O GEN to which you			ST/OBC)	
6. N	lationality:				
7. R	Religion:		8.Marital St	atus:	

9. Educat	tional/Academic	9. Educational/Academic/Technical/Professional Qualifications (Attach proof):-									
Examination Passed	Subject	_	ne of nstitution	Name o	f Pass y with	or of sing %of orks	No. of attempts				
Matric											
*M.B.B.S.											
*M.D./M.S/DNB											
*DNB/M.Ch./D.M											
Please attach proof of Recognition of MBBS/MD/MS degree by Medical Council of India. Candidates possessing Degree/PG degree not recognized by MCI will not be allowed to appear for interview.  10. No. of papers published: National International International Awards and Additional Qualification such as members of scientific society etc.  12. Chronological details of up to date appointment after obtaining postgraduate qualification (attach experience certificate)											
Post held	From		То			tion/En	nployer's dress				
` ,	13. (a) Central/State Medical Council with which the applicant is registered (attach proof) :										
(b) Medical Registration Number :											

14. Permanent Address					15. Correspondence Address:				
Pin Code:						Pin Code:			
Mobile No:		<u> </u>				Mobile No:			
E. Mail I.D.:						E. Mail I.D.:			
are true, complete and event of any information terminated without any	that corr on b	ed by I am rect to being son or	an I the foun	ndia bes	an N st o alse	National and all statements made in this application of my knowledge and belief. I understand that in the or incorrect, my appointment will be liable to be. I also understand that in case of my final selection satisfactory police verification.	ne be		
Date:									
Place:		_				(Signature of the applicant)			

#### CHECK LIST FOR THE POST OF SENIOR RESIDENT ON REGULAR BASIS IN THE

DISCIPLINE/DEPARTMENT OF	
DISCIPLINE/DEPARTMENT OF	

## (Put a cross (X) wherever applicable)

Sr. No.	Copy of the documents (self -attested)	Please tick (√)
01	Certificate for Date of Birth (Class X or XII Certificate)	
02	MBBS Mark Sheets (All Semester)	
03	MBBS Degree	
04	Internship completion certificate	
05	Attempt certificates	
06	MCI/DCI registration	
07	MD/MS/DNB/PG Diploma certificate	
08	SC/ST/OBC/PH certificate issued by the competent authority (if applicable)	
09	Experience (if any)	
10	No Objection Certificate (if any)	
11	Copies of any other relevant documents	

Signature of the Candidate:	
Date:	

## \DECLARATION TO BE SIGNED BY OBC CANDIDATES ONLY

I	son/daughter Shri					
resident of Villa	ge/ Town/ City/ District_		State	Commur	nity	
	(certificate enclosed)	hereby decl	are that I	belong	to	
the	community which	is recognized a	ıs a backwar	d class by t	the	
Govt. of India fo	or the purpose of reservat	ion in services	as per order	rs contained	in	
Department of F	Personnel and Training Off	ice Memorandur	n No.36012/2	22/93-Estt(S0	CT)	
dated 8.9.1993. I	t is also declared that I do	not belong to the	he persons/se	ections (crea	my	
layer) mentioned	in Column 3 of OM No. 3	6012/22/93-Estt(	SCT) dated (	08.09.1993 a	and	
modified vide Gov	vt. of India, Department of F	Personnel and Tr	aining OM No	0.36033/3/200	04-	
Estt(Res) dated 0	9.03.2004.					
Place:		<b>/2:</b>				
Date:		, ,	ire of applica ing handwritin	•		
Dato.		(III Tallill	ng nanawilan	9/		
CER	FIFICATE / NO OBJECTION	BY THE PRESE	NT EMPLOY	ER		
(In case candidate	e is in Govt. / Semi Govt. / PS	SU/ Autonomous	Body service	etc.)		
No		D	)ate			
	e remarks that there is no ol	ojection to the se	lection/appoin	tment of Dr.		
		to the p	oost applied fo	or at AIIMS,		
Nagpur						
Date:		Signature of th	ıe employer v	vith Office		

# FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR APPOINTMENT TO POST UNDER THE GOVERNMENT OF INDIA

This is to certify	that Shri / Smt. / Kum*				son	/ daughter of
	of					
District		in			state	belongs
to	community which is rec	ognised a	s a b	ackward	d class under :-	
Section 1, No.186 dated (2) Resolution No.120 No.163, dated 20th Octo (3) Resolution No.120 dated 25th May 1995. (4) Resolution No.120 No.210, dated 11th Dec (5) Resolution No.120 (6) Resolution No.120 (7) Resolution No.120 (8) Resolution No.120 (9) Resolution No.120 (10) Resolution No.120 (11) Resolution No.120 (12) Resolution No.120 (12) Resolution No.120 (13) Resolution No.120 (14) Resolution No.120 (15) Resolution No.120 (16) Resolution No.120 (17) Resolution No.120 (18) Resolution No.120 (19) Resolution No.120 (19) Resolution No.120	011/9/94-BCC dated 19th October 19 ober 1994. 011/7/95-BCC, dated 24th May, 199: 011/44/96-BCC, dated 6th December	994, published i 5, published i 1996, publis e of India - Ex e of India - Ex	d in the direct of the direct	ne Gazette of Indi n Gazette of dinary - No dinary - No	of India - Extraordinary - part 1, S ia - Extraordinary - part 1, S of India - Extraordinary - part 2, 2, 2, 2, 2, 2, 3, 4, 2, 2, 3, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,	Part 1, Section 1, Section 1, No.88, Int 1, Section 1, 197. 197. 197. 197. 198. 198. 199. 199.
thehe/she does not belo Government of In 08.09.1993) and	District of the ong to the persons/sections (C dia, Department of Personn modified vide Government Estt.(Res) dated 09.03.2004.	reamy Lay	yer) i	mentione OM NO	State. This is also ed in column 3 (of the State O.36012/22/93 - Estt	s to certify that Schedule to the (SCT), dated
Place :				Sign	nature_	
Dated :				Dis	strict Magistrate/Dy.	Commissioner etc
*Strike out whichev	ver is not applicable				(	(With seal of office
<b>NB:</b> (a) The term 'o People's Act., 1950	rdinarily' used here will have to	the same m	eani	ng as in s	section 20 of the Repre	sentation of
						The
<b>Authorities compe</b>	etent to issue OBC caste certi	ficates are	indi	cated be	elow:-	
Commissioner / Do	strate / Additional Magistrate eputy Collector / 1st class St tive Magistrate / Extra Assista	ipendiary	Mag	istrate / S	Sub - Divisional Mag	gistrate / Taluk

- (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate/ Presidency Magistrate.
- (iii) Revenue Officer not below the rank of Tahasildar, and

Magistrate).

(iv) Sub-Divisional Officer of the area where the Candidate and or his family resides.